

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

MAR 17 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Yates Petroleum Corporation		O. C. D. ARTESIA, OFFICE	
Address 105 South 4th St., Artesia, NM 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
Recompletion <input type="checkbox"/>			
Change in Ownership <input type="checkbox"/>			

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Desert Rose Unit	Well No. 1	Pool Name, including Formation Foor Ranch-PrePermian Gas	Kind of Lease State, Federal or Fee	State State	Lease No. LG 4429
Location Unit Letter <u>H</u> ; <u>1780</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>11</u> Township <u>9S</u> Range <u>26E</u> , NMPM, <u>Chaves</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 1188, Houston, TX 77001					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 11	Twp. 9s	Rge. 26e	Is gas actually connected? Yes	When 3-15-88

If this production is commingled with that from any other lease or pool, give commingling order number: _____

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'y. <input type="checkbox"/>	Diff. Res'y. <input type="checkbox"/>
Date Spudded 7-30-87	Date Compl. Ready to Prod. 9-26-87		Total Depth 6360'		P.B.T.D. 6195'			
Elevations (DF, RKB, RT, GR, etc.) 3824' GR	Name of Producing Formation Penn		Top Oil/Gas Pay 6067'		Tubing Depth 5991'			
Perforations 6067-80'					Depth Casing Shoe 6360'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	40'	
12-1/4"	8-5/8"	838'	600 SX
7-7/8"	5-1/2"	6360'	275 SX
	2-7/8"	5991'	

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

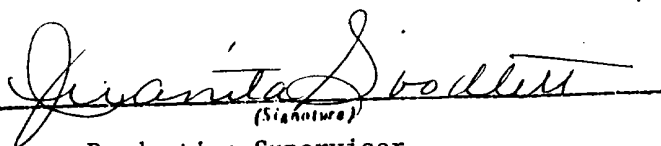
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 560	Length of Test 24 hrs	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 215	Casing Pressure (shut-in) Pkr	Choke Size 5/16"

VII. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)

Production Supervisor

(Title)

3-15-88

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 5 1988, 19BY Original Signed By
Mike WilliamsTITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 110.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Form C-104 must be filed for each pool in multiple

MAR 04 '88

All distances must be from the outer boundaries of the Section.

Operator YATES PETROLEUM CORPORATION			Lease DESERT ROSE UNIT		O. C. D.	Well No. 1
Unit Letter H	Section 11	Township 9S	Range 26E	County CHAVES		

Actual Footage Location of Well:

1780	feet from the North	line and	660	feet from the East	line
Ground Level Elev. 3824'	Producing Formation <i>Mississippi and</i>			Dedicated Acreage: <i>3.20</i>	

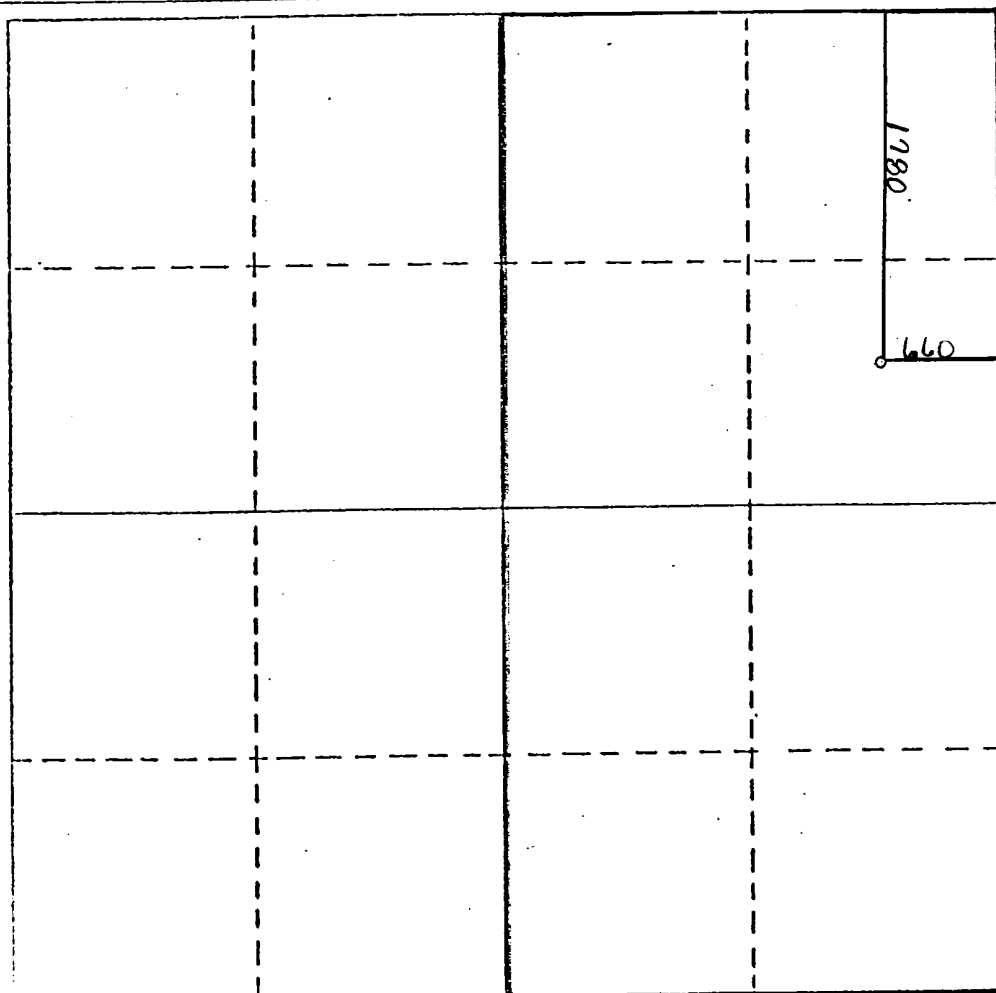
FOOT RANCH PRE-TEMIAN
So. Pecos slope

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Unitized

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Rusty Jernigan
Name

Rusty Jernigan

Position

Regulatory Secretary

Company

Yates Petroleum Corporation

Date

March 4, 1988

I hereby certify that the well location shown on this plot was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

REFER TO ORIGINAL PLAT

Date Surveyed

Registered Professional Engineer
and/or Land Surveyor

Certificate No.

